


011604
15750 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. 1.53(b))	Attorney Docket No.	B03-84	Total Pages:	12
	First Inventor	Michael J. Sullivan		
	Title	GOLF BALL WITH POLYSULFIDE RUBBER LAYER		
	Express Mail Label No.	EV065935722US		

2390 U.S. PTO
10759494

011604

APPLICATION ELEMENTS <i>See M.P.E.P Chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450				
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS				
2. <input checked="" type="checkbox"/> Specification [Total Pages: 18] <ul style="list-style-type: none">- Descriptive Title of the Invention- Cross Reference to Related Applications- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims- Abstract of the Disclosure	5. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))				
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets: 2]	6. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)				
4. Oath or Declaration [Total Pages: 2] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 13 completed)	7. <input checked="" type="checkbox"/> Information Disclosure Statement/Reference List <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Copies of IDS Citations				
12. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in a preliminary amendment: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 10/103,413 Prior application information: Examiner: <u>Alvin Hunter</u> Art Unit: <u>3711</u> The entire disclosure of the prior application is considered a part of the disclosure of the accompanying Continuation, Divisional or Continuation-in-part application, and is hereby incorporated by reference.	8. <input checked="" type="checkbox"/> Preliminary Amendment				
13. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number <input checked="" type="checkbox"/> Correspondence Address Below					
Name	Troy R. Lester Acushnet Company				
Address	PO Box 965				
City	Fairhaven	State	MA	Zip Code	02719-0965
Country	U.S.	Telephone	(508) 979-3534	Fax	(508) 979-3092
Name	Troy R. Lester	Registration No. (Attorney/Agent)	36,200		
Signature			Date	1-16-04	

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 810.00

Complete If Known

Application Number	To Be Assigned
Filing Date	January 16, 2004
First Named Inventor	Michael J. Sullivan
Examiner Name	To Be Assigned
Art Unit	To Be Assigned
Attorney Docket No.	B03-84

METHOD OF PAYMENT

☒ Deposit Account:
 Deposit Account Number **502309**
 Deposit Account Name **Acushnet Company**

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity

Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	Utility filing fee	770
1002	340	Design filing fee	
1004	770	Reissue filing fee	
1005	160	Provisional filing fee	

SUBTOTAL (1) (\$ 770

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee From Below	Fee Paid
Total Claims	20	20** = 0	18 = 0
Independent Claims	3	3** = 0	86 = 0

Large Entity

Fee Code	Fee (\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent claims in excess of 3
1204	86	**Reissue independent claims over original patent
1205	18	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0

**or number previously paid, if greater; For Reissues, see above

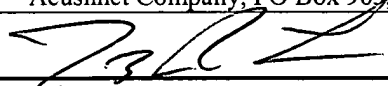
3. ADDITIONAL FEES

Large Entity

Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	Surcharge – late filing fee or oath	
1052	50	Surcharge – late provisional filing fee or cover sheet	
1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1251	110	Extension for reply within first month	
1252	420	Extension for reply within second month	
1253	950	Extension for reply within third month	
1254	1,480	Extension for reply within fourth month	
1255	2,010	Extension for reply within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1451	1,510	Petition to institute a public use proceeding	
1452	110	Petition to revive – unavoidable	
1453	1,350	Petition to revive – unintentional	
1501	1,330	Utility issue fee (or reissue)	
1502	480	Design issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	Submission of Information Disclosure Stmt	
8021	40	Recording each patent assignment per property (times number of properties)	40
1809	770	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited examination of a design application	
1814	110	Statutory Disclaimer	
Other fee (specify) _____			

***Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 40**

SUBMITTED BY

Name	Troy R. Lester	Registration No. (Attorney/Agent)	36,200
Address	Acushnet Company, PO Box 965, Fairhaven, MA 02719-0965	Telephone	(508) 979-3534
Signature		Date	1-16-04